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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).		Latrice First name M. Middle name	First name Middle name
	Bring iden	g your picture tification to your ting with the trustee.	Wilson Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-7283	

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Debtor 1 Latrice M. Wilson Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN			
5.	Where you live	2040 Oak Loch Trace Norcross, GA 30093	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Gwinnett				
		County	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Latrice M. Wilson Case number (if known)

Par	Tell the Court About						
7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankrupto e box.	y
	choosing to file under	■ C	hapter 7				
		□с	hapter 11				
		□с	hapter 12				
		□с	hapter 13				
8.	How you will pay the fee	•	about how yo	u may pay. Typica attorney is submitt	lly, if you are paying the fee yo	k with the clerk's office in your local court for more de burself, you may pay with cash, cashier's check, or mo alf, your attorney may pay with a credit card or check	ney
					ments. If you choose this option	on, sign and attach the Application for Individuals to P	ay
			I request tha	t my fee be waive	ed (You may request this optio	n only if you are filing for Chapter 7. By law, a judge m	nay,
			applies to you	ir family size and y	ou are unable to pay the fee in	our income is less than 150% of the official poverty line in installments). If you choose this option, you must fill cial Form 103B) and file it with your petition.	that out
9.	Have you filed for bankruptcy within the last 8 years?	■ No					
	iast o years?	□ Ye	es. District		When	Case number	
			District		When	0	
			District		When	Case number Case number	
			District		vviicii	Case Hullibel	
10.	Are any bankruptcy	■ No)				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Ye	9S.				
	affiliate?		Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□No	o. Go to I	ne 12.			
	residence?	■ Ye	es. Has yo	ur landlord obtaine	ed an eviction judgment agains	t you?	
			•	No. Go to line 12.			
				Yes. Fill out <i>Initial</i> bankruptcy petitio		Judgment Against You (Form 101A) and file it with thi	S

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Document Page 4 of 67 Debtor 1 Latrice M. Wilson Case number (if known) Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation. partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat What is the hazard? of imminent and identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Latrice M. Wilson Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

]	I am not required to receive a briefing about credit
	counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Latrice M. Wilson				Case nu	mber (if known)	
Part	t 6: Answer These Quest	ions for Re	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a pe			defined in 11 U.S.C. § 101(8)	as "incurred by an
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily money for a business or in			ebts that you incurred to obtain business or investment.	1
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	u owe that are not cons	umer debts or bus	iness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7 are paid that funds will be			property is excluded and adminters?	nistrative expenses
	administrative expenses		■ No				
	are paid that funds will be available for		□Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	1 -49		1 ,000-5,00	00	 25,001-50,000	
	you estimate that you owe?	☐ 50-99		5001-10,00	00	□ 50,001-100,000	
	OWE:	<u> </u>		□ 10,001-25,	,000	☐ More than100,00	0
		□ 200-99	99				
19.	How much do you	= \$0 - \$9	50.000	□ \$1,000,00°	1 - \$10 million	□ \$500,000,001 - \$	1 billion
	estimate your assets to be worth?		01 - \$100,000		01 - \$50 million	<u> </u>	
			001 - \$500,000		01 - \$100 million 001 - \$500 million	☐ \$10,000,000,001 ☐ More than \$50 bi	
		□ \$500,0	001 - \$1 million	— \$100,000,0	001 - \$300 Hillion	I Wore than \$50 bi	IIIOI
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,00°	1 - \$10 million	□ \$500,000,001 - \$	1 billion
	estimate your liabilities to be?		01 - \$100,000	. , ,	01 - \$50 million	\$1,000,000,001	
			001 - \$500,000		01 - \$100 million 001 - \$500 million	☐ \$10,000,000,000 ☐ More than \$50 b	
		L \$500,0	001 - \$1 million	— \$100,000,0			
Part	t7: Sign Below						
For	you	I have ex	amined this petition, and I o	declare under penalty of	f perjury that the ir	nformation provided is true and	d correct.
						ible, under Chapter 7, 11,12, c I I choose to proceed under Ch	
			ney represents me and I di t, I have obtained and read			s not an attorney to help me fil).	I out this
		I request	relief in accordance with the	e chapter of title 11, Un	ited States Code,	specified in this petition.	
		bankrupto and 3571	cy case can result in fines u			ey or property by fraud in conr 20 years, or both. 18 U.S.C. §	
			M. Wilson		Signature of De	ebtor 2	
		Signature	of Debtor 1				
		Executed	on September 23, 20	21	Executed on		
			MM / DD / YYYY		-	MM / DD / YYYY	

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Debtor 1 Latrice M. Wilson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ ChaRoi	n A. Ballard	Date	September 23, 2021
Signature of	Attorney for Debtor		MM / DD / YYYY
ChaRon A Printed name	. Ballard 251011		
The Ballar	d Law Group, P.C		
3664 Club Suite 203			
	ville, GA 30044		
Number, Street,	City, State & ZIP Code		
Contact phone	404-220-9906	Email address	theballardlawgroup@gmail.com
251011 GA	1		
Rar number & St	tata		

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Fill in	this inforn	nation to identify you	r case:			
Debto	r 1	Latrice M. Wilso	n			
	_	First Name	Middle Name	Last Name		
Debto (Spouse	r 2 e if, filing)	First Name	Middle Name	Last Name		
United	l States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA		
Cooo						
(if know	number				_	Check if this is an amended filing
Stat	ement		Affairs for Individ		ankruptcy equally responsible for sup	4/1
nform	ation. If m		attach a separate sheet to		y additional pages, write yo	
Part 1	Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1. W	hat is your	current marital statu	ıs?			
	Married Not mar	ried				
2. D	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	l No l Yes. Lis	t all of the places you	ived in the last 3 years. Do no	ot include where you live now	ı.	
C		ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad		Dates Debtor 2 lived there
					ity property state or territor ico, Texas, Washington and V	
	No Yes. Ma	ke sure you fill out <i>Sci</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	n the Sources of You	ır Income			
Fi	Il in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calenda ary 1 to De	r year: cember 31, 2020)	■ Wages, commissions, bonuses, tips	\$4,338.25	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Latrice M. Wilson Case number (if known)

	D.14.4			
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For the calendar year before that: (January 1 to December 31, 2019)	■ Wages, commissions, bonuses, tips	\$3,378.38	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
5. Did you receive any other incom Include income regardless of whet and other public benefit payments winnings. If you are filing a joint ca List each source and the gross inc No Yes. Fill in the details.	ther that income is taxable. Ex- ; pensions; rental income; intelese and you have income that	amples of other income are a rest; dividends; money collec you received together, list it o	ted from lawsuits; royalties; ar nly once under Debtor 1.	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2020)	Social Security Benefits	\$6,494.40		
	Child Support	\$12,372.00		
	Food Stamp Assistnce	\$6,305.00		
For the calendar year before that: (January 1 to December 31, 2019)	Social Security Benefits	\$4,869.00		
	Child Support	\$9,279.00		
	Food Stamp Assistnce	\$5,400.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

□ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No. Go to line 7.

Use List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

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Debtor 1 Latrice M. Wilson Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
7.	Within 1 year before you filed for bankruptc Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	tners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	rships of which yo securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for
	■ No □ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No		paid nents or transfer a		ccount of a d	ebt that benefited an
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Atlan Home Inc vs LATRICE WILSON 19M34333	SMALL CLAIMS JUDGMENT	GWINNETT MAGISTRATE COURT - LAWRENCEVILL		☐ Pending ☐ On appeal ☐ Concluded -1,121.00	
					- 1,121.00	
	Autovest LLC VS. Latrice Wilson 21-C-04627-S3	on Civil State Court of Gwinnett County 75 Langdy Drive Lawrenceville, GA 30046		e	■ Pending□ On appeal□ Concluded	
	Velocity Investments LLC vs Latrive Wilson 21-M-15623	trive Wilson Gwinnett County		ty ⁄e	Pending On appe	eal
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, fo	oreclosed, garnis	hed, attached	d, seized, or levied?
	■ No. Go to line 11. □ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
						property

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			L	Jucument	raye II U	07				
Del	otor 1 Latrice I	M. Wilson				Case number (if known)			
11.	Within 90 days I	before you filed for bank	ruptcy, d	did any creditor,	including a bank o	or financial ins	titution, set off any a	amounts from your		
	accounts or refu	use to make a payment b	ecause	you owed a debt	.?					
	No									
	☐ Yes. Fill in t	he details.								
	Creditor Name	and Address	Des	scribe the action	the creditor took		Date action was	Amount		
	Oroano, manio	and Madi 550			tilo orounor took		taken	7		
12.		fore you filed for bankru			operty in the poss	session of an a	ssignee for the ben	efit of creditors, a		
	court-appointed	l receiver, a custodian, o	r anothe	er official?						
	■ No									
	☐ Yes									
Par	t 5: List Certa	in Gifts and Contribution	S							
12	Within 2 years h	efore you filed for bankr	untov d	lid vou givo any	nifts with a total w	alue of more th	an \$600 per person	2		
13.		derore you med for banki	ирісу, с	ild you give ally t	jiits with a total ve	alde of filore th	iaii wooo pei peisoii	•		
	_ 110									
	☐ Yes. Fill in t	he details for each gift.								
		al value of more than \$60	0	Describe the gi	fts		Dates you gave	Value		
	per person						the gifts			
	Person to Who	m You Gave the Gift and								
	Address:									
14.	Within 2 years b	efore you filed for bankr	uptcy, d	lid you give any લ	jifts or contributio	ons with a total	value of more than	\$600 to any charity?		
	No									
	Yes. Fill in the details for each gift or contribution.									
	Gifts or contrib	outions to charities that	otal	Describe what	you contributed		Dates you	Value		
	more than \$600)			·		contributed			
	Charity's Name									
	Address (Number	r, Street, City, State and ZIP Code	e)							
Par	t 6: List Certa	in Losses								
15.		efore you filed for bankru	ptcy or	since you filed fo	or bankruptcy, did	you lose anyti	ning because of the	ft, fire, other disaster		
	or gambling?									
	.									
	■ No									
	☐ Yes. Fill in	the details.								
		roperty you lost and	Descri	be any insurance	coverage for the	loss	Date of your	Value of property		
	how the loss of	ccurred	Include	the amount that i	nsurance has paid.	List pending	loss	lost		
			insuran	ice claims on line	33 of Schedule A/B	3: Property.				
D-	List Contain	B	_							
Par	t 7: List Certa	in Payments or Transfers	5							
16.	Within 1 year be	efore you filed for bankru	ptcv. di	d vou or anvone	else acting on vou	ır behalf pav o	r transfer any prope	rty to anyone you		
		t seeking bankruptcy or				a bonan pay o	i transisi any propo	ity to unyone you		
	Include any attori	neys, bankruptcy petition p	reparers	s, or credit counse	ling agencies for se	ervices required	in your bankruptcy.			
	_									
	□ No									
	Yes. Fill in t	he details.								
	Person Who W	as Paid		Description an	d value of any pro	perty	Date payment	Amount of		
	Address			transferred		•	or transfer was	payment		
	Email or websit						made			
		ade the Payment, if Not \	ou							
	The Ballard L	•		FF \$338			08/25/2021	\$1,287.00		
	3664 Club Dri	ive		AF \$899						

3664 Club Drive Suite 203-A

Lawrenceville, GA 30044

CR \$50

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Debtor 1 Latrice M. Wilson Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and val transferred	ue of any prope	erty	Date payment or transfer was made	Amount of payment
	Debt Education & Certification 114 Goliad Street Benbrook, TX 76126	ccc			08/20/2021	\$15.00
	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors on Do not include any payment or transfer that you lis			r transfer any proper	ty to anyone who	
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid	Description and val	ue of any prope	ertv	Date payment	Amount of
	Address	transferred	ue of any prope	.i ty	or transfer was made	payment
	Within 2 years before you filed for bankruptcy,			fer any prop	erty to anyone, other	than property
	transferred in the ordinary course of your busing linclude both outright transfers and transfers made include gifts and transfers that you have already lise	as security (such as the		curity interes	t or mortgage on your	property). Do not
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer	Description and val	Description and value of Describe			Date transfer was
	Address Person's relationship to you	property transferred			received or debts	made
	• •					
	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No		property to a se	elf-settled tru	ıst or similar device o	of which you are a
	NoYes. Fill in the details.					
	Name of trust	Description and val	Description and value of the property transferred			Date Transfer was made
Part	8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit B	soxes, and Stora	age Units		
	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred?	-				
	Include checking, savings, money market, or or or houses, pension funds, cooperatives, associati No		•	f deposit; sh	ares in banks, credit	unions, brokerage
	Yes. Fill in the details.					
		ZIP account number instrument closed, moved,		te account was used, sold, oved, or nsferred	Last balance before closing or transfer	
	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for b	ankruptcy, any	safe deposi	t box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number Street City State and ZIR Code)	Who else had acces		escribe the	contents	Do you still have it?
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Stre State and ZIP Code)	ei, City,			Have It!

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Debtor 1 Latrice M. Wilson Case number (if known)

22.	Have you stored property in a storage unit or p No	place other than your home within 1	year before you filed for bankruptcy	?					
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
Par	9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust					
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	10: Give Details About Environmental Inform	nation							
For	he purpose of Part 10, the following definitions	s apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	law, whether you now own, operate,	or utilize it or used					
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.						
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environm	ental law?					
	No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any	y release of hazardous material?							
	■ No								
	Yes. Fill in the details.			5					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or admini	istrative proceeding under any envi	ironmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or Co	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?					
	$f \square$ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time						
	■ A member of a limited liability company	y (LLC) or limited liability partnersh	ip (LLP)						

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Deb	Latrice M. Wilson	Ca	se number (if known)
	☐ A partner in a partnership		
	☐ An officer, director, or managing ex	ecutive of a corporation	
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation	
	lacksquare No. None of the above applies. Go to F	Part 12.	
	Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name	Describe the nature of the business	Employer Identification number
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.
	High garage Many I December 11.0	Oceanotic	Dates business existed EIN: 85-1023411
	Highness Xtend Beauty LLC 2040 Oak Loch Trace	Cosmetic	00 1020111
	Norcross, GA 30093	N/A	From-To May 2020- Present
Par	No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) t 12: Sign Below	Date Issued	
are t with 18 U		false statement, concealing property, or o \$250,000, or imprisonment for up to 20 year	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
	rice M. Wilson nature of Debtor 1	Signature of Debtor 2	
Date	e September 23, 2021	Date	
Did y ■ N □ Y	·	ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
■ N		t an attorney to help you fill out bankrupto	

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		Document	Page 15 of 67		
Fill in this infor	rmation to identify your ca	se and this filing:			
Debtor 1	Latrice M. Wilson				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
		IORTHERN DISTRICT OF (
Office States B	anniaptoy Court for the.	IONTILIAN BIOTAIOT OF	<u> </u>		
Case number					☐ Check if this is an amended filing
					amenaca ming
Official Fo	orm 106A/B				
	le A/B: Prope	rtv.			40/45
			If an asset fits in more than on	o catogory list the asset in	12/15
think it fits best. I	Be as complete and accurate are space is needed, attach a	as possible. If two married pe	ople are filing together, both are n the top of any additional page	e equally responsible for s	upplying correct
Part 1: Describe	e Each Residence, Building, L	and, or Other Real Estate You	ı Own or Have an Interest In		
1. Do you own or	have any legal or equitable in	nterest in any residence, build	ling, land, or similar property?		
■ No. Go to Pa	ort 2				
Yes. Where					
□ res. where	is the property:				
Dart 2. Deceribe	- Vaur Vahialaa				
Part 2: Describe	e Your Vehicles				
someone else dr	rives. If you lease a vehicle,	also report it on Schedule G	es, whether they are register G: Executory Contracts and Ur		ehicles you own that
3. Cars, vans, t	rucks, tractors, sport utili	ty vehicles, motorcycles			
□ No					
Yes					
3.1 Make:	Ford	Who has an interest in	n the property? Check one		claims or exemptions. Put red claims on <i>Schedule D:</i>
Model: Year:	Fusion 2013	Debtor 1 only			aims Secured by Property.
-	ate mileage: 95,7	Debtor 2 only Debtor 1 and Debtor	or 2 only	Current value of the entire property?	Current value of the portion you own?
Other infor	rmation:	At least one of the o	debtors and another		
		Check if this is con (see instructions)	mmunity property	\$6,975.00	\$6,975.00
•	•		rehicles, other vehicles, and		
Examples: Boa	ats, trailers, motors, person	al watercraft, fishing vessels	s, snowmobiles, motorcycle ac	cessories	
■ No					
☐ Yes					
			es from Part 2, including any		\$6,975.00
	e Your Personal and Househ				
Do you own or	have any legal or equitab	le interest in any of the fol	lowing items?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

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D	ebtor 1	Latrice M. Wi	Ison Case number (if known))
6.		nold goods and fu ples: Major applianc	es, furniture, linens, china, kitchenware	
		. Describe		
				** ***
			HHGF'S	\$1,500.00
7.	□ No	les: Televisions an	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music phones, cameras, media players, games	collections; electronic devices
			Electronics	\$500.00
8.	Examp		igurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coir ns, memorabilia, collectibles	n, or baseball card collections;
9.	Examp No	nent for sports an oles: Sports, photog musical instrui	raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
10	■ No		shotguns, ammunition, and related equipment	
11.	□ No		thes, furs, leather coats, designer wear, shoes, accessories	
			Used Clothes	\$500.00
12.	□ No		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
13	Exam ■ No	arm animals uples: Dogs, cats, b	•	
14.	■ No	ther personal and . Give specific info	household items you did not already list, including any health aids you did not list	
15	5. Add	the dollar value o	f all of your entries from Part 3, including any entries for pages you have attached umber here	\$3,000.00

Official Form 106A/B Schedule A/B: Property page 2

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Debte	or 1 Latrice M. W	ilson			Case number (if known)	
Part 4	L: Describe Your Finance	ial Asset	s			
				n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples: Money you h No		•	ome, in a safe deposit box, and on h	nand when you file your petition	
				counts; certificates of deposit; shares s with the same institution, list each. Institution name:		ses, and other similar
		17.1.	Checking	Navy Federal		\$994.67
		17.2.	Savings	Navy Federal		\$0.67
19. N	No Yeson-publicly traded stooint venture No	ock and	Institution or issuer	porated and unincorporated busing		an LLC, partnership, and
	Yes. Give specific info		about them me of entity:		% of ownership:	
<i>\</i> ^	Negotiable instruments Non-negotiable instrum No	include p ents are	personal checks, ca those you cannot tr	otiable and non-negotiable instrur shiers' checks, promissory notes, an ansfer to someone by signing or deli	nd money orders.	
	Yes. Give specific info		about them uer name:			
E	No	RA, ERI	SA, Keogh, 401(k),	403(b), thrift savings accounts, or otl	her pension or profit-sharing pla	ns
Ц	Yes. List each accoun		ely. of account:	Institution name:		
E		d deposi	s you have made s	o that you may continue service or u , public utilities (electric, gas, water),		, or others
	Yes			Institution name or individua	ıl:	
_	•	r a perio	dic payment of mon	ey to you, either for life or for a numl	ber of years)	
	No Yes Iss	suer nam	e and description.			
26	terests in an education U.S.C. §§ 530(b)(1), 5			qualified ABLE program, or under	a qualified state tuition progra	am.
		stitution i	name and description	on. Separately file the records of any	interests.11 U.S.C. § 521(c):	
25. T	rusts, equitable or fut	ure inte	rests in property (other than anything listed in line 1), and rights or powers exerci	sable for your benefit

■ No
Official Form 106A/B Schedule A/B: Property page 3

Case 21-57143-pmb Doc 1 Filed 09/23/21 Entered 09/23/21 23:14:41 Desc Main Page 18 of 67 Document Debtor 1 Latrice M. Wilson Case number (if known) ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance: health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Gerber Life Insurance Policy for Debtor** Son \$0.00 and Debtors children (No Cash Value) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim.......

Official Form 106A/B Schedule A/B: Property page 4

35. Any financial assets you did not already list

☐ Yes. Give specific information..

■ No

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Debtor 1	Latrice M. Wilson	-aye 19 01	Case number (if known)	
	d the dollar value of all of your entries from Part 4, including Part 4. Write that number here			\$995.34
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. Do yo	u own or have any legal or equitable interest in any business-relate	ed property?		
No.	Go to Part 6.			
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You f you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do y	ou own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
■ N	o. Go to Part 7.			
ΠY	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Exai ■ No	ou have other property of any kind you did not already list? mples: Season tickets, country club membership s. Give specific information	,		
54. Ad	d the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Par	t 1: Total real estate, line 2			\$0.00
56. Par	t 2: Total vehicles, line 5	\$6,975.00		
57. Par	t 3: Total personal and household items, line 15	\$3,000.00		
58. Par	t 4: Total financial assets, line 36	\$995.34		
59. Par	t 5: Total business-related property, line 45	\$0.00		
60. Par	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Par	t 7: Total other property not listed, line 54 +	\$0.00		
62. Tot	al personal property. Add lines 56 through 61	\$10,970.34	Copy personal property tota	\$10,970.34

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$10,970.34

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Fill in this inform	ation to identify your	case:		
Debtor 1	Latrice M. Wilson			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA	
Case number				Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
HHGF'S Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	O.C.G.A. § 44-13-100(a)(4)
Ellio II di II donedale 702.			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B: 7.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(4)
Line Holli Schedule AVD. 111			100% of fair market value, up to any applicable statutory limit	
Used Clothes Line from Schedule A/B: 11.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(4)
Line Holli Schedule AVD. TT.T			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(5)
Line nom Schedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit	
Checking: Navy Federal Line from Schedule A/B: 17.1	\$994.67	•	\$994.67	O.C.G.A. § 44-13-100(a)(6)
Line from Genedule FAD. 1111			100% of fair market value, up to any applicable statutory limit	

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Deb	otor 1	Latrice M. Wilson			Case number (if known	
		description of the property and line on dule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
			Copy the value from Schedule A/B			
		ings: Navy Federal from Schedule A/B: 17.2	\$0.67	-	\$0.67	O.C.G.A. § 44-13-100(a)(6)
	LINE	Hotti Schedule A/B. 11.2	☐ 100% of fair market value, up to any applicable statutory limit			
3.		you claiming a homestead exemption of ject to adjustment on 4/01/22 and every 3			led on or after the date of adjustme	nt.)
		No				
		Yes. Did you acquire the property covered	ed by the exemption wi	thin 1	215 days before you filed this case	?
		□ No				
		☐ Yes				

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		Document Pa	age 22	of 67		
Fill in this infor	mation to identify you	ur case:				
Debtor 1	Latrice M. Wilso	on				
	First Name	Middle Name La	st Name		•	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name La	ist Name			
United States Ba	ankruptcy Court for the	: NORTHERN DISTRICT OF GEOR	GIA			
Case number (if known)						if this is an
Official For	m 106D				amend	ied illing
		s Who Have Claims Se	cured	by Propert	у	12/15
	ne Additional Page, fill it	If two married people are filing together, bout, number the entries, and attach it to the				
,	,. s have claims secured b	v vour property?				
		his form to the court with your other sch	adulas Voi	ı have nothing else t	o report on this form	
_		·	iedules. Tot	a nave nothing else t	o report on this form.	
■ Yes. Fill i	in all of the information	below.				
Part 1: List A	All Secured Claims					
		more than one secured claim, list the creditor		Column A	Column B	Column C
		s a particular claim, list the other creditors in Fical order according to the creditor's name.	Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	not the claims in alphabet	ibal order according to the creditor 3 hame.		value of collateral.	claim	If any
2.1 Bridgecr		Describe the property that secures the o	claim:	\$14,469.00	\$6,975.00	\$7,494.00
Creditor's Nar	ne	2013 Ford Fusion 95,713 miles				
	st Hampton					
Avenue	_	As of the date you file, the claim is: Chec	k all that			
Suite 100		apply.				
Mesa, AZ		Contingent				
Number, Stree	et, City, State & Zip Code	Unliquidated				
Who owes the d	lebt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mort	gage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and D	Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
	the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this community d	claim relates to a	Other (including a right to offset)				
	Opened 11/19 Last					

7801

Last 4 digits of account number

Active

Date debt was incurred 7/18/21

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Debtor 1 Latrice M. Wilson	Case number (if known)			
First Name Middle N	ame Last Name	_		
2.2 World Finance	Describe the property that secures the claim:	\$80.00	\$0.00	\$80.00
Creditor's Name	Secured			
Attn: Bankruptcy				
Po Box 6429	As of the date you file, the claim is: Check all the apply.	at		
Greenville, SC 29606	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage car loan)	or secured		
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Onened				
Opened 11/17 Last				
Date debt was incurred Active 08/18	Last 4 digits of account number 12	201		
•	olumn A on this page. Write that number here:	\$14,549.00		
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$14,549.00		
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed			
trying to collect from you for a debt you o than one creditor for any of the debts that	e notified about your bankruptcy for a debt tha we to someone else, list the creditor in Part 1, you listed in Part 1, list the additional creditor	and then list the collection agency h	nere. Similarly, if you h	nave more
debts in Part 1, do not fill out or submit th	ns paye.			
Name, Number, Street, City, State 8	k Zip Code O	n which line in Part 1 did you enter the	creditor? 2.1	
Bridgecrest Po Box 29018		sat 4 digita of account number		
Phoenix, AZ 85038	Là	ast 4 digits of account number		
Name, Number, Street, City, State 8	k Zip Code O	n which line in Part 1 did you enter the	creditor? 2.2	
World Finance Po Box 6429		not 4 digits of account number		
Greenville, SC 29607	La	ast 4 digits of account number		
•				

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		Docume	nt Page 24 of 6	67		
Fill in this	information to identify your case	se:				
Debtor 1	Latrice M. Wilson					
20210	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name			
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA			
Case numb	per				_	Check if this is an amended filing
Official I	Form 106E/F					
Schedu	le E/F: Creditors Wh	o Have Unsec	ured Claims			12/15
Schedule G: Schedule D: left. Attach tl name and ca	ry contracts or unexpired leases the Executory Contracts and Unexpire Creditors Who Have Claims Secure the Continuation Page to this page. ase number (if known).	d Leases (Official Form d by Property. If more s f you have no information	106G). Do not include any cre pace is needed, copy the Par	editors with partially s	ecured claims number the er	s that are listed in ntries in the boxes on the
	List All of Your PRIORITY Unse					
	creditors have priority unsecured c	laims against you?				
	Go to Part 2.					
identify possible Part 1. I	of your priority unsecured claims. It what type of claim it is. If a claim has b, list the claims in alphabetical order a f more than one creditor holds a particle explanation of each type of claim, see	oth priority and nonpriority ccording to the creditor's ular claim, list the other c	y amounts, list that claim here a name. If you have more than tw editors in Part 3.	and show both priority a	nd nonpriority	amounts. As much as
,	,		,	Total claim	Priority amount	Nonpriority amount
	eorgia Department of Reven	ue Last 4 digits o	f account number	\$0.00		\$0.00 \$0.00
Ba 18 <u>At</u>	ority Creditor's Name Inkruptcy Section 00 Century Blvd, Suite 1720 Ianta, GA 30345 mber Street City State Zip Code	0	debt incurred? you file, the claim is: Check	all that apply	-	
Who ii	ncurred the debt? Check one.	☐ Contingent				
■ Del	btor 1 only	☐ Unliquidate	d			
☐ Del	btor 2 only	☐ Disputed				
_	btor 1 and Debtor 2 only	•	RITY unsecured claim:			
	least one of the debtors and another	☐ Domestic s	upport obligations			
_	eck if this claim is for a community	debt Taxes and	certain other debts you owe the	e government		
	claim subject to offset?		leath or personal injury while yo	•		
■ No		Other. Spec	cify			
— 163	•					

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Debto	r 1 Latrice M. Wilson		Case number (if known)	
2.2	Internal Revenue Service Priority Creditor's Name 401 W. Peachtree St. NW	Last 4 digits of account number When was the debt incurred?	\$0.00	\$0.00
	Stop:334-D Atlanta, GA 30308 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
V	Who incurred the debt? Check one.	☐ Contingent	опсок ан инасарру	
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	\square At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government	
ls	s the claim subject to offset?	\square Claims for death or personal injury	while you were intoxicated	
	No	Other. Specify		
	Yes			
4. Lis	Yes. st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what t	ype of claim it is. Do not list claims already in	ncluded in Part 1. If more
4.1	AcceptanceNOW	Last 4 digits of account number	6643	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 5501 Headquarters Drive Plano, TX 75024 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 02/17 Last Active 4/10/18 s: Check all that apply	_
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or diverse that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Rental Agre	eement	

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Debtor	1 Latrice M. Wilson	Case number (if known)		
4.2	America Coradius International Nonpriority Creditor's Name	Last 4 digits of account number	8273	\$791.90
	2420 Sweet Home Rd. Ste 150	When was the debt incurred?		
	Buffalo, NY 14228-2244	_		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify SunTrust B	anks, Inc.	
4.3	Autovest LLC	Last 4 digits of account number	27\$3	\$15,000.00
	Nonpriority Creditor's Name c/o Roosen Varchetti & Olivier	When was the debt incurred?		
	P O Box 1186			
	Smyrna, GA 30081	_		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Gwinnett C Civil Action	ounty State Court n Case No 21-C-04627-S3	
4.4	Caine & Weiner	Last 4 digits of account number	3310	\$265.00
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 1/04/21 Last Active	
	5805 Sepulveda Blvd	When was the debt incurred?	11/20	
	Sherman Oaks, CA 91411	_		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Collection	Attorney Progressive	

Debtor	1 Latrice M. Wilson	Case number (if known)	
	Cardiovascular Group, PC	Last 4 digits of account number 8005	\$26.00
	Nonpriority Creditor's Name P.O.Box 530211 Atlanta, GA 30353	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.6	CHOC Childrens Specialists	Last 4 digits of account number 3683	\$376.00
	Nonpriority Creditor's Name 1202 La Veta Ave. Orange, CA 92858	When was the debt incurred?	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
	CHOC Childrens Specialists	Last 4 digits of account number 0671	\$2,389.88
	Nonpriority Creditor's Name 1202 La Veta Ave. Orange, CA 92858	When was the debt incurred?	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bill	

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Debtor '	Latrice M. Wilson			
	Citibank	Last 4 digits of account number	8321	\$0.00
	Nonpriority Creditor's Name Citibank SD MC 425 5800 South Corp Place Sioux Falls, SD 57108	When was the debt incurred?	Opened 10/05 Last Active 08/11	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes	report as priority claims Debts to pension or profit-sharin	ration agreement or divorce that you did not	
4.9	Citibank	Last 4 digits of account number	8320	\$0.00
	Nonpriority Creditor's Name Citibank SD MC 425 5800 South Corp Place Sioux Falls, SD 57108	When was the debt incurred?	Opened 10/05 Last Active 08/11	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: ration agreement or divorce that you did not	
	No □ Yes	Debts to pension or profit-sharing	g plans, and other similar debts	
	_ 163	- Other. Specify		
<u> </u>	Convergent Outsourciing Inc Nonpriority Creditor's Name 800 SW 39th St PO Box 9004	Last 4 digits of account number When was the debt incurred?	3558	\$412.23
	Renton, WA 98057 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: ration agreement or divorce that you did not	
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Comcast	g plans, and other similar debts	

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Debto	or 1 Latrice M. Wilson		Case number (if known)	
4.1 1	Diversified Adjustment Service	Last 4 digits of account number	6899	\$1,373.71
	Nonpriority Creditor's Name 600 Coon Rapids Blvd. Minneapolis MN 55433	When was the debt incurred?		
	Minneapolis, MN 55433 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Sprint		
4.1	First Investors Financial Services	Last 4 digits of account number	0001	\$0.00
	Nonpriority Creditor's Name 380 Interstate North Parkway	_	Opened 10/16 Last Active	
	3rd Floor	When was the debt incurred?	2/01/19	
	Atlanta, GA 30399 Number Street City State Zip Code		in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан тлат арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.1	Lynch EMS	Last 4 digits of account number	3389	\$1.680.95
3	Nonpriority Creditor's Name 2950 E La Jolla Street	When was the debt incurred?		¥ 1,000000
	Anaheim, CA 92806-1307 Number Street City State Zip Code	As of the date you file, the claim	in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	з. Спеск ан так арру	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	0 1	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other similar 4-bt-	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Medical		

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Latrice M. Wilson Case number (if known)

Deb	tor 1 Latrice M. Wilson	Case number (if known)	
4.1 4	Maroon Bells Emerg. Phys. LLC	Last 4 digits of account number 2181	\$1,638.00
	Nonpriority Creditor's Name P O Box 13691	When was the debt incurred?	
	Philadelphia, PA 19101-3691		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Medical	
	1		
4.1 5	Mediation Recovery Center	Last 4 digits of account number 1925	\$561.85
	Nonpriority Creditor's Name P.O. Box 646	When was the debt incurred?	
	DeKalb, IL 60115		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Best Bank/Guaranty Bank DDA	
4.1	Mediation Recovery Center	Last 4 digits of account number 1925	\$561.85
6	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ301.03
	P.O. Box 546	When was the debt incurred?	
	DeKalb, IL 60115	As of the date was file the plainties OL	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Best Bank/Guaranty Bank DDA	

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Debtor	1 Latrice M. Wilson		Case number (if known)	
4.1	Navient	Last 4 digits of account number	1109	\$6,154.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9640 Wilkes-Barre, PA 18773 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 11/05 Last Active 07/21	
	Who incurred the debt? Check one.	7.5 or the date you me, the claim.	o. Oncok all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐Yes	☐ Other. Specify		
		Educationa	I	
4.1 8	Navient Nonpriority Creditor's Name	Last 4 digits of account number	1109	\$3,431.00
	Attn: Bankruptcy Po Box 9640	When was the debt incurred?	Opened 11/05 Last Active 07/21	
	Wilkes-Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa	ıl	
4.1 9	Navy FCU Nonpriority Creditor's Name	Last 4 digits of account number	3431	\$50.00
	Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	When was the debt incurred?	Opened 03/21 Last Active 08/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card		

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Debtor 1 Latrice M. Wilson		Case number (if known)		
4.2	Navy FCU	Last 4 digits of account number	3431	\$50.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 03/21 Last Active 8/05/21 s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	· ·	
4.2	Navy Federal Credit Union	Last 4 digits of account number	8230	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3000	When was the debt incurred?	Opened 08/20 Last Active 04/21	
	Merrifield, VA 22119 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		d claim:	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Secured		
4.2	Navy Federal Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	8230	\$0.00
	Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	When was the debt incurred?	Opened 08/20 Last Active 04/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Secured	· · · · · · · · · · · · · · · · · · ·	

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Debtor 1 Latrice M Wilson Case number (if known)

Latrice M. Wilson		Case number (if kno	wn)	
Nelnet	Last 4 digits of account number	4389		\$8,84
Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505	When was the debt incurred?	Opened 09/07 7/31/21	Last Active	·
Lincoln, NE 68501 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that appl	· · · · · · · · · · · · · · · · · · ·	
Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that appi	у	
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or d	divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other sin	nilar debts	
☐ Yes	Other. Specify			
	Educationa	ıl		
Nelnet	Last 4 digits of account number	4289		\$4,69
Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505	When was the debt incurred?	Opened 09/07 7/31/21	Last Active	
Lincoln, NE 68501 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that anni	v	
Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that appl	у	
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or c	livorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts	
Yes	Other. Specify			
	Educationa	ıl		
OneMain	Last 4 digits of account number	7619		\$5,05
Nonpriority Creditor's Name P O Box 3251 Evansville, IN 47731-3251	When was the debt incurred?			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that appl	у	
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation	ration agreement or d	livorce that you did not	
Is the claim subject to offset?	report as priority claims			
No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts	
☐ Yes	Other. Specify Account			

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Debto	Latrice M. Wilson		Case number (if known)	
4.2 6	OneMain Financial	Last 4 digits of account number	7619	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3251 Evansville, IN 47731 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim i	Opened 06/18 Last Active 09/18 s: Check all that apply	
	Debtor 1 only	Continuent		
	Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify Unsecured		
4.2	OneMain Financial Nonpriority Creditor's Name	Last 4 digits of account number	2394	\$0.00
	Attn: Bankruptcy Po Box 3251	When was the debt incurred?	Opened 11/17 Last Active 6/08/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Unsecured		
4.2	Peach State Federal Credit Union	Last 4 digits of account number	4001	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 1505 Lakes Parkway, Ste 100 Lawrenceville, GA 30043	When was the debt incurred?	Opened 05/15 Last Active 10/21/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify Automobile Other Specify Automobile		

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Debto	Latrice M. Wilson		Case number (if known)	
4.2 9	Portfolio Recovery Associates, LLC Nonpriority Creditor's Name	Last 4 digits of account number	0776	\$452.00
	Attn: Bankruptcy 120 Corporate Boulevard Norfolk, VA 23502 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is	Opened 01/21 Last Active 07/18 is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Bank Usa N	Company Account Capital One N.A.	
4.3	Professional Account Mgmt. LLC	Last 4 digits of account number	9684	\$25.45
	Nonpriority Creditor's Name State Road and Tollway P O Box 671	When was the debt incurred?	12/13/2019	
	Milwaukee, WI 53201-0671 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Plate CME8		
		Other. Specify		
4.3	Providence Southern California Nonpriority Creditor's Name	Last 4 digits of account number	5321	\$28.00
	P O Box 31001-3000 Pasadena, CA 91110-3000	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3 · · · · · · · · · · · · · · · · · · ·	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical		

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Debto	Latrice M. Wilson	Case number (if known)	
4.3	Sibley Heart Center Cardiology	Last 4 digits of account number 5881	\$26.88
2	Nonpriority Creditor's Name P O Box 116617	Last 4 digits of account number 5881 When was the debt incurred?	\$20.00
	Atlanta, GA 30368-6617	when was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		□ Debts to pension or profit-sharing plans, and other similar debts	
	No		
	Yes	■ Other. Specify Medical	
4.3	Source Receivables Mgmt	Last 4 digits of account number 8185	\$1,371.71
<u>. </u>	Nonpriority Creditor's Name		* /-
	4615 Dundas Drive	When was the debt incurred?	
	Suite 102		
	Greensboro, NC 27407 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no of the date you me, the diamine. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	•	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Sprint	
4.3	South Gwinnett Radiology	Last 4 digits of account number 6545	\$34.00
4	Nonpriority Creditor's Name	Last 4 digits of account number 6545	φ34.00
	P.O.Box 116075 Atlanta, GA 30368-6075	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify Medical	

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	Case number (if known)		Latrice M. Wilson
\$0.00	1303	Last 4 digits of account number	Suntrust Bank/glelsi
	Opened 9/07/07 Last Active		Nonpriority Creditor's Name
	5/31/18	When was the debt incurred?	2401 International Lane Madison, WI 53704
	s: Check all that apply	As of the date you file, the claim is	Number Street City State Zip Code
		П	Who incurred the debt? Check one.
		☐ Contingent	Debtor 1 only
		☐ Unliquidated	Debtor 2 only
	Loloim	☐ Disputed Type of NONPRIORITY unsecured	Debtor 1 and Debtor 2 only
	i ciaiii.	Student loans	At least one of the debtors and another
	ration agreement or divorce that you did not	☐ Obligations arising out of a separ	☐ Check if this claim is for a community
		report as priority claims	s the claim subject to offset?
	g plans, and other similar debts	Debts to pension or profit-sharing	No No
		Other. Specify	Yes
	<u> </u>	Educationa	
\$36,910.00	8581	Last 4 digits of account number	USDOE/GLELSI
	Opened 01/12 Last Active 07/21	When was the debt incurred?	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860
			Madison, WI 53707
	s: Check all that apply	As of the date you file, the claim is	Number Street City State Zip Code Who incurred the debt? Check one.
		☐ Contingent	Debtor 1 only
		☐ Unliquidated	Debtor 2 only
		☐ Disputed	Debtor 1 and Debtor 2 only
	l claim:	Type of NONPRIORITY unsecured	\square At least one of the debtors and another
		Student loans	☐ Check if this claim is for a community
	ration agreement or divorce that you did not	☐ Obligations arising out of a separeport as priority claims	debt s the claim subject to offset?
	g plans, and other similar debts	Debts to pension or profit-sharing	No
		Other. Specify	Yes
	I	Educationa	
\$15,705.00	1577	Last 4 digits of account number	USDOE/GLELSI
	Opened 10/09 Last Active 07/21	When was the debt incurred?	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860
		As of the date you file, the claim is	Madison, WI 53707 Number Street City State Zip Code
			Who incurred the debt? Check one.
		☐ Contingent	Debtor 1 only
		☐ Unliquidated	Debtor 2 only
		☐ Disputed	Debtor 1 and Debtor 2 only
	I claim:	Type of NONPRIORITY unsecured	\square At least one of the debtors and another
		Student loans	\square Check if this claim is for a community
	ration agreement or divorce that you did not	☐ Obligations arising out of a separ	debt
	·	report as priority claims	s the claim subject to offset?
	·	report as priority claims Debts to pension or profit-sharing	s the claim subject to offset? No

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Debtor	1 Latrice M. Wilson	Case number (if known)	
4.3			
8	Velocity Investments LLC	Last 4 digits of account number 5623	\$4,100.00
	Nonpriority Creditor's Name c/o Mandarich Law Group LLP 125 Pownpark Dr Ste 350	When was the debt incurred?	
	Kennesaw, GA 30144 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
		<u> </u>	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	_ ****	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	— 140	_ Gwinnett County Magistrate Court	
	Yes	Other. Specify Civil Action Case No 21-M-1523	
Part 3:	List Others to Be Notified About a D	Light That You Already Listed	
		·	i a callection amount
is tryi have	ing to collect from you for a debt you owe to s	d about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if someone else, list the original creditor in Parts 1 or 2, then list the collection agency her hat you listed in Parts 1 or 2, list the additional creditors here. If you do not have addition t or submit this page.	e. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	otanceNOW	Line 4.1 of (Check one):	
	Headquarters Drive , TX 75024	■ Part 2: Creditors with Nonpriority Unsecured Claim	ns
rialio	, IX 73024	Last 4 digits of account number	
N	ord Address	On which particles Double and a Double of indicate that the particle of conditions	
	ind Address rest LLC	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (<i>Check one</i>):	
	oosen Varchetti & Olivier	Part 2: Creditors with Nonpriority Unsecured Claims	
POB	ox 1186	Part 2: Greators with Nonphority Onsecured Claim	IIS
Smyrı	na, GA 30081		
		Last 4 digits of account number	
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	& Weiner	Line 4.4 of (Check one):	
	ox 55848 nan Oaks, CA 91413	Part 2: Creditors with Nonpriority Unsecured Claim	ns
0110111	nan Jako, GA 01410	Last 4 digits of account number	
Name a	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Citiba		Line 4.8 of (Check one):	
	South Corporate Place	Part 2: Creditors with Nonpriority Unsecured Clain	ns
Sioux	Falls, SD 57108	Last 4 digits of account number	
Name a Citiba	and Address	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (<i>Check one</i>):	
	South Corporate Place	Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claim	
	Falls, SD 57108	Part 2: Creditors with Nonpriority Unsecured Clain	ns
		Last 4 digits of account number	
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
First I	nvestors Financial Services	Line 4.12 of (Check one):	
	Akers Mill Road	Part 2: Creditors with Nonpriority Unsecured Clain	ns
Atlant	ta, GA 30339	Last 4 digits of account number	
Name o	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	nett Magistrate Court	Line 4.3 of (Check one):	
75 Laı	ngley Drive	Part 2: Creditors with Nonpriority Unsecured Claim	ns
Lawre	enceville, GA 30045		·· ·
		Last 4 digits of account number	

Official Form 106 E/F

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Debtor 1 Latrice M. Wilson		Case number (if known)	
Name and Address Mandarich Law Group LLP	On which entry in Part 1 or Part 2 or Line 4.38 of (<i>Check one</i>):	lid you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
P O Box 109032	Line 4.30 of (Check one).	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago, IL 60610		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
Navient	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Po Box 9500 Wilkes Barre, PA 18773		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Wilkes Daire, FA 10773	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	Jid you liet the original areditor?	
Navient	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Po Box 9500		Part 2: Creditors with Nonpriority Unsecured Claims	
Wilkes Barre, PA 18773		— Tart 2. Creditors with Northfoling Onsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or		
Navy FCU	Line 4.19 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
820 Follin Lane Se Vienna, VA 22180		Part 2: Creditors with Nonpriority Unsecured Claims	
Vicinia, VA 22100	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	Hid you list the original creditor?	
Navy FCU	Line 4.20 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
820 Follin Lane		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Vienna, VA 22180		— Fait 2. Ordators with Northfield Ordators Ordators	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?	
Navy Federal Credit Union	Line <u>4.21</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
1 Security Place Merrifield, VA 22116		Part 2: Creditors with Nonpriority Unsecured Claims	
Merrineid, VA 22110	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
Navy Federal Credit Union	Line 4.22 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
1 Security Place		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Merrifield, VA 22116	Look 4 digits of account number	. a.	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 o	<u> </u>	
Nelnet Po Box 82561	Line 4.23 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Lincoln, NE 68501		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	tid you list the original creditor?	
Nelnet	Line 4.24 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Po Box 82561		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Lincoln, NE 68501	Last 4 digits of account number		
Name and Address OneMain Financial	On which entry in Part 1 or Part 2 o		
Po Box 1010	Line 4.26 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Evansville, IN 47706		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
OneMain Financial	Line 4.27 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Po Box 1010		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Evansville, IN 47706	Last 4 digits of account number		
Name and Address Peach State Federal Credit Union	On which entry in Part 1 or Part 2 or Line 4.28 of (Check one):	lid you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
1505 Lakes Parkway	Line or (oneck one).	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
•		- Fart 2. Creditors with Monphority Onsecured Claims	

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Latrice M. Wilson		Case number (if known)
Lawrenceville, GA 30043		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Portfolio Recovery Associates, LLC	Line 4.29 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
120 Corporate Blvd Ste 100 Norfolk, VA 23502		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
USDOE/GLELSI	Line 4.36 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
2401 International Lane Madison, WI 53704		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
USDOE/GLELSI	Line 4.37 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
2401 International Lane Madison, WI 53704		Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 75,737.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 36,266.82
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 112,003.82

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Fill in this inform	mation to identify your	case:		
Debtor 1	Latrice M. Wilson			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4	<u> </u>				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			<u></u>
	City		State	ZIP Code	_

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		Docume	ni Paye 42 0	107	_
Fill in this info	ormation to identify your	case:			
Debtor 1	Latrice M. Wilson	1			
DODIO! !	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Ott: o: o I ⊏	a was 40011				
	orm 106H	• .			
Schedul	e H: Your Cod	ebtors			12/15
Arizona, C ■ No. Go □ Yes. Did 3. In Column in line 2 a	alifornia, Idaho, Louisiana to line 3. d your spouse, former spouse n 1, list all of your codebt gain as a codebtor only i	, Nevada, New Mexico, Pu use, or legal equivalent live tors. Do not include your if that person is a guaran	e rto Rico, Texas, Wash e with you at the time? spouse as a codebtor ator or cosigner. Make	ington, and Wisconsin. if your spouse is filir sure you have listed t	ng with you. List the person shown
out Colun		Form 106E/F), or Sched	ule G (Official Form 10	16G). Use Schedule D	, Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor , Number, Street, City, State and Z	IP Code			editor to whom you owe the debt
Name	, Number, Otreet, Oity, State and 2	ii Code		Check all schedul	еѕ тат аррту.
3.1				Schedule D, lir	
Name				☐ Schedule E/F,	
				☐ Schedule G, lir	ne
Numb	per Street	Otete	71D O- 4-		
City		State	ZIP Code		
				_	
3.2 Name	<u>.</u>			Schedule D, lir	
ivallie	•			☐ Schedule E/F, ☐ Schedule G, lii	
				— Scriedule G, III	
Numb City	per Street	State	ZIP Code		

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Fill	in this information to i	dentify your ca	ase:								
Del	otor 1	_atrice M. W	ilson								
	otor 2										
Uni	ted States Bankruptcy	Court for the	NORTHERN DISTRIC	T OF GEORGIA							
(If kr	se number	1001					□ An		d filing ent showing	g postpetition ollowing date:	
_	fficial Form 1						M	M / DD/ Y	YYY		
S	chedule I: Y	our Inc	ome								12/15
spo atta	use. If you are separch a separate sheet t1: Describe I Fill in your employ	ated and you to this form. (Employment	are married and not filir r spouse is not filing wi On the top of any addition	th you, do not incl	ude infor	mati	on about	your spo mber (if l	ouse. If mo known). A	ore space is	needed,
	information.			☐ Employed						ing spouse	
	If you have more that attach a separate particular information about accemployers.	age with	Employment status Occupation	■ Not employed				☐ Emplo	-		
	Include part-time, se self-employed work		Employer's name								
	Occupation may incor homemaker, if it a		Employer's address								
			How long employed the	nere?				_			
Par	t 2: Give Detai	Is About Mor	thly Income								
spoi	use unless you are se	parated.	ate you file this form. If you								
more	e space, attach a sepa	arate sheet to	this form.				For Dob	tor 1	For Dol	htor 2 or	
							For Deb	IOI I		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$		0.00	\$	N/A	
3.	Estimate and list n	nonthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inc	come. Add lir	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Latrice M. Wilson	_	Case	e number (if known)			
				Fo	r Debtor 1		or Debtor 2 or on-filing spouse	
	Cop	y line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$_	0.00	\$	N/A	
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.	\$ _	0.00	\$	N/A N/A	
	5g. 5h.	Other deductions. Specify:	5g. 5h.+		0.00	+ \$	N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$ \$	0.00	\$	N/A	
				Ť -		٠.		
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 8c.	\$	1,031.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	548.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamp Assistance	e 8f.	\$_	600.00	\$	N/A	
		Child Tax Credit IRS (Pandemic)		\$	800.00	\$	N/A	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,979.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,979.00 + \$		N/A = \$	2,979.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depen		•			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certallies					12. \$	2,979.00
13.	Do :	you expect an increase or decrease within the year after you file this form	1?				Combine monthly	
		No.						

Fill	in this information to identify yo	our case:					
Deb	tor 1 Latrice M. W	ilson			Chec	k if this is:	
	otor 2 Duse, if filing)					An amended filing A supplement shov 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the	· NORTH	HERN DISTRICT OF GEOR	RGIA	_	MM / DD / YYYY	
		. NOITH	ILINIA DIOTINIOTI OF GEOF	NOIA .	'	WIIWI / DD / TTTT	
1	e number nown)						
	fficial Form 106J	Evnor	200				40/4
Be info nur	as complete and accurate as ormation. If more space is ne nber (if known). Answer eve	possible eded, atta ry questio	. If two married people ar ich another sheet to this i				
Par 1.	t 1: Describe Your House Is this a joint case?	hold					
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live	in a separ	ate household?				
	☐ No ☐ Yes. Debtor 2 mus	st file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	<i>hold</i> of Debt	or 2.	
2.	Do you have dependents?	□ No					
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the					•	□ No
	dependents names.			Son		2	■ Yes □ No
				Son		8	■ Yes
						40	□ No
				Son		16	■ Yes □ No
							☐ Yes
3.	Do your expenses include expenses of people other t yourself and your depende	han _	No Yes				
Est exp	Estimate Your Ongoi imate your expenses as of y eenses as of a date after the plicable date.	our bankr	uptcy filing date unless y	ou are using this fo lemental <i>Schedule</i>	rm as a sup J, check th	oplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
the	lude expenses paid for with value of such assistance an ficial Form 106I.)					Your expe	enses
4.	The rental or home owners payments and any rent for the		_	nclude first mortgage	4. \$		900.00
	If not included in line 4:						_
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner's	s, or rente	's insurance		4a. \$ 4b. \$		0.00
	4c. Home maintenance, re	epair, and	upkeep expenses		4c. \$		0.00
5.	4d. Homeowner's associatedAdditional mortgage payment			me equity loans	4d. \$ 5. \$		0.00 0.00

Electricity, heat, natural gas Vater, sewer, garbage collection Elephone, cell phone, Internet, satellite, and cable services Other. Specify: Ind housekeeping supplies Index ear and children's education costs Index gas, laundry, and dry cleaning Index ear	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$	130.00 70.00 109.00 0.00 930.00 100.00 100.00 80.00 0.00 0.00 67.00 0.00 73.00
Rectricity, heat, natural gas Vater, sewer, garbage collection Relephone, cell phone, Internet, satellite, and cable services Other. Specify: Ind housekeeping supplies Are and children's education costs Ing, laundry, and dry cleaning I all care products and services I and dental expenses I and dental expenses I and dental expenses I and car payments. Include car payments. Inment, clubs, recreation, newspapers, magazines, and books I ble contributions and religious donations Ince. Include insurance deducted from your pay or included in lines 4 or 20. If insurance Realth insurance Realth insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Incent or lease payments:	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	70.00 109.00 0.00 930.00 0.00 100.00 0.00 80.00 0.00 67.00
Vater, sewer, garbage collection felephone, cell phone, Internet, satellite, and cable services other. Specify: Ind housekeeping supplies are and children's education costs gg, laundry, and dry cleaning al care products and services I and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inment, clubs, recreation, newspapers, magazines, and books ible contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. ife insurance felalth insurance other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. incent or lease payments:	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	70.00 109.00 0.00 930.00 0.00 100.00 0.00 80.00 0.00 67.00
delephone, cell phone, Internet, satellite, and cable services other. Specify: Ind housekeeping supplies are and children's education costs are and children's education costs are and children's education costs are products and services. I and dental expenses ortation. Include gas, maintenance, bus or train fare. Include car payments. Inment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations are. Include insurance deducted from your pay or included in lines 4 or 20. If insurance are deficitly insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes payments:	6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	109.00 0.00 930.00 0.00 100.00 100.00 80.00 0.00 67.00 0.00
other. Specify: Ind housekeeping supplies are and children's education costs Indicate products and services I and dental expenses Ortation. Include gas, maintenance, bus or train fare. Include car payments. Inment, clubs, recreation, newspapers, magazines, and books Include insurance deducted from your pay or included in lines 4 or 20. If insurance Idealth insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Include insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Include insurance. Specify: Include insurance. Specify: Include insurance. Specify: Include insurance. Specify:	6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 930.00 0.00 100.00 0.00 80.00 0.00 0.00
and housekeeping supplies are and children's education costs ag, laundry, and dry cleaning al care products and services I and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inment, clubs, recreation, newspapers, magazines, and books ible contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. include insurance. Include insurance.	7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	930.00 0.00 100.00 100.00 0.00 80.00 0.00
are and children's education costs g, laundry, and dry cleaning al care products and services I and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inment, clubs, recreation, newspapers, magazines, and books ible contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance (ehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. include insurance.	8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 100.00 100.00 0.00 80.00 0.00 67.00
g, laundry, and dry cleaning al care products and services I and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inment, clubs, recreation, newspapers, magazines, and books ible contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance (ehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. include insurance.	9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	100.00 100.00 0.00 80.00 0.00 0.00
al care products and services I and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inment, clubs, recreation, newspapers, magazines, and books ible contributions and religious donations ice. include insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. include insurance. Include insurance other insurance.	10. 11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$	100.00 0.00 80.00 0.00 0.00 67.00
I and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inment, clubs, recreation, newspapers, magazines, and books ible contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance (ehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. include insurance.	11. 12. 13. 14. 15a. 15b. 15c. 15d.	\$	0.00 80.00 0.00 0.00 67.00
ortation. Include gas, maintenance, bus or train fare. Include car payments. Include car payments. Include car payments. Include contributions and religious donations Ince. Include insurance deducted from your pay or included in lines 4 or 20. Include insurance Include Include Include Include Include Include Include Included Include I	12. 13. 14. 15a. 15b. 15c. 15d.	\$ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	80.00 0.00 0.00 67.00 0.00
include car payments. inment, clubs, recreation, newspapers, magazines, and books ible contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. ife insurance dealth insurance deficie insurance other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. : inent or lease payments:	13. 14. 15a. 15b. 15c. 15d.	\$	0.00 0.00 67.00 0.00
inment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations are. Include insurance deducted from your pay or included in lines 4 or 20. ife insurance delath insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. in the control of the contro	13. 14. 15a. 15b. 15c. 15d.	\$	0.00 0.00 67.00 0.00
ble contributions and religious donations nce. include insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance (chicle insurance) ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. : nent or lease payments:	14. 15a. 15b. 15c. 15d.	\$	67.00 0.00
include insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance (ehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. : inent or lease payments:	15a. 15b. 15c. 15d.	\$ \$ \$	67.00 0.00
include insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance (ehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. : inent or lease payments:	15b. 15c. 15d.	\$ \$	0.00
ife insurance lealth insurance /ehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. : nent or lease payments:	15b. 15c. 15d.	\$ \$	0.00
lealth insurance /ehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. : nent or lease payments:	15b. 15c. 15d.	\$ \$	0.00
Pehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. : nent or lease payments:	15c. 15d.	\$	
Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. : nent or lease payments:	15d.	·	73.00
Do not include taxes deducted from your pay or included in lines 4 or 20. :		\$	0.00
: nent or lease payments:	16.		0.00
nent or lease payments:	16.	Ф	0.00
		\$	0.00
or novemonic for Volucio 1	17a.	¢	420.00
car payments for Vehicle 1 Car payments for Vehicle 2	17a. 17b.	·	420.00
, ,		*	0.00
Other. Specify:	17c.	*	0.00
Other. Specify:	17d.	\$	0.00
ayments of alimony, maintenance, and support that you did not report		\$	0.00
ed from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10 payments you make to support others who do not live with you.	10.	\$	
:	19.	Ψ	0.00
eal property expenses not included in lines 4 or 5 of this form or on S		ur Incomo	
lortgages on other property	20a.		0.00
Real estate taxes	20b.		0.00
roperty, homeowner's, or renter's insurance	20c.	·	
		·	0.00
Anintenance, repair, and upkeep expenses	20d.	·	0.00
lomeowner's association or condominium dues	20e.		0.00
Specify:	21.	+\$	0.00
ate your monthly expenses			
		\$	2,979.00
S .	I-2		2,313.00
	7 2	· . ———	0.070.00
u iirie zza ario zzb. Trie resuit is your montniy expenses.		D	2,979.00
ate your monthly net income.			
•	23a.	\$	2,979.00
		·	2,979.00
opposed them and 220 above.	200.	<u> </u>	2,313.00
subtract your monthly expenses from your monthly income.			
	23c.	\$	0.00
	'		
d ate	line 22a and 22b. The result is your monthly expenses. e your monthly net income. py line 12 (your combined monthly income) from Schedule I. py your monthly expenses from line 22c above. btract your monthly expenses from your monthly income. e result is your monthly net income. expect an increase or decrease in your expenses within the year after the le, do you expect to finish paying for your car loan within the year or do you expect	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 line 22a and 22b. The result is your monthly expenses. e your monthly net income. py line 12 (your combined monthly income) from Schedule I. 23a. py your monthly expenses from line 22c above. 23b. btract your monthly expenses from your monthly income. e result is your monthly net income. 23c. expect an increase or decrease in your expenses within the year after you file this	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 line 22a and 22b. The result is your monthly expenses. e your monthly net income. py line 12 (your combined monthly income) from Schedule I. py your monthly expenses from line 22c above. 23a. \$ 23b\$ btract your monthly expenses from your monthly income. e result is your monthly net income. \$ expect an increase or decrease in your expenses within the year after you file this form? le, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase.

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Fill in this inform	nation to identify you	case:			
Debtor 1	Latrice M. Wilson	n			
D. I	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DIST	RICT OF GEORGIA		
Case number					
(if known)					Check if this is an amended filing
Official Fo		on for Indiv	riduals Filing Under (Chapter 7	12/15
_	vidual filing under cha e claims secured by ye	-	out this form if:		
you have leas You must file this	ed personal property s form with the court ver is earlier, unless t	and the lease has no within 30 days after	ot expired. you file your bankruptcy petition or by e time for cause. You must also send c		
	eople are filing togethe	er in a joint case, bo	th are equally responsible for supplyin	g correct information.	Both debtors must
	and accurate as possi our name and case nu		needed, attach a separate sheet to thi	is form. On the top of a	any additional pages,
Part 1: List Yo	our Creditors Who Ha	ve Secured Claims			
1. For any creditor information be	-	Part 1 of Schedule D	: Creditors Who Have Claims Secured	by Property (Official F	orm 106D), fill in the
	editor and the property	that is collateral	What do you intend to do with the preserves a debt?		you claim the property cempt on Schedule C?
Creditor's B	ridgecrest		☐ Surrender the property.	■ No	0
			Retain the property and redeem it.Retain the property and enter into a	☐ Ye	es
	2013 Ford Fusion	95,713 miles	Reaffirmation Agreement.		
property securing debt:			☐ Retain the property and [explain]:		
Part 2: List Yo	our Unexpired Person	al Property I eases			
For any unexpire in the informatio	ed personal property l n below. Do not list re	ease that you listed al estate leases. Un	in Schedule G: Executory Contracts at expired leases are leases that are still the trustee does not assume it. 11 U.S.	in effect; the lease per	
Describe your u	nexpired personal pro	perty leases		Will the le	ease be assumed?
Lessor's name:				□ No	
Description of lea	ased			_	
Property:				☐ Yes	
Lessor's name:				□ No	
Description of lea Property:	ased			☐ Yes	
Lessor's name:				□ No	

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Del	tor 1 Latrice M. Wilson	Case number (if known)
De	scription of leased	
	perty:	☐ Yes
	sor's name:	□ No
	scription of leased perty:	☐ Yes
	sor's name:	□ No
	scription of leased perty:	☐ Yes
	sor's name: scription of leased	□ No
	perty:	☐ Yes
	sor's name:	□ No
	scription of leased perty:	☐ Yes
Pai	Sign Below	
	er penalty of perjury, I declare that I have indicated my intention a perty that is subject to an unexpired lease.	bout any property of my estate that secures a debt and any personal
Χ	/s/ Latrice M. Wilson	X
	Latrice M. Wilson	Signature of Debtor 2
	Signature of Debtor 1	
	Date September 23, 2021	Date

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Fill in this infor	mation to identify your	case:		
Debtor 1	Latrice M. Wilson	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			issets
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,970.34
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10,970.34
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,549.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	112,003.82
	Your total liabilities	\$	126,552.82
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,979.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,979.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other so	hedules.
7.	■ Yes What kind of debt do you have?		

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

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Debtor 1 Latrice M. Wilson Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	75,737.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	75,737.00

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							•	
Fill in th	his inforr	mation to identify your	case:					
Debtor '	1	Latrice M. Wilson						
		First Name	Middle Name	La	st Name			
Debtor 2	_							
(Spouse if	, filing)	First Name	Middle Name	La	st Name			
United S	States Ba	inkruptcy Court for the:	NORTHERN DISTRIC	T OF GEOR	GIA			
Case nu	ımher							
(if known)							☐ Check if this is an	
							amended filing	
Officia	al Forn	n 106Dec						
Dec	larat	ion About a	n Individua	I Debt	or's Sch	edules	12/15	
								_
If two m	arried pe	eople are filing together	r, both are equally resp	onsible for	supplying correct	t information.		
.,								
							tement, concealing property, or 000, or imprisonment for up to 20	
		8 U.S.C. §§ 152, 1341, 1		iikiupicy ca	se can result iii ii	nes up to \$250,0	oo, or imprisonment for up to 20	
	Sign	n Below						
								_
Die	d you pa	y or agree to pay some	one who is NOT an atte	orney to help	you fill out banl	kruptcy forms?		
_	No							
	No							
	Yes. N	Name of person					nkruptcy Petition Preparer's Notice,	
						Declaratio	n, and Signature (Official Form 119)	
		Ity of perjury, I declare	that I have read the su	mmary and	schedules filed w	ith this declarat	ion and	
tha	t they are	e true and correct.						
х	/s/ Latr	rice M. Wilson		Х				
		M. Wilson			Signature of Del	btor 2		_
	Signatur	re of Debtor 1			•			
	D-4- 6	2			Data			
	Date _	September 23, 2021			Date			_

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia

In r	e Latrice M. Wilson	Case No.	
	Debtor(s)	Chapter	7
1.	DISCLOSURE OF COMPENSATION OF ATTORN Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney		. ,
1.	compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		899.00
	Prior to the filing of this statement I have received	\$	899.00
	Balance Due	\$	0.00
2.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other person unl	ess they are memb	pers and associates of my law firm
	☐ I have agreed to share the above-disclosed compensation with a person or persons who copy of the agreement, together with a list of the names of the people sharing in the co		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects o	f the bankruptcy ca	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determ b. Preparation and filing of any petition, schedules, statement of affairs and plan which me c. Representation of the debtor at the meeting of creditors and confirmation hearing, and a d. Representation of the debtor in adversary proceedings and other contested bankruptcy re e. [Other provisions as needed] Pursant to General Order. 9, the Statment of Rights and Responsibility 	ay be required; any adjourned hear matters;	rings thereof;
	Service included: Helping client obtain pre-filing credit briefing Helping client obtain pay advices Helping client to obtain tax transcripts/returns Initial Intake Preparation and filing of petition Attorney apperance at 341 Meeting of Creditors Change of Address Preparation and filing of one (1) Motion to Avoid Lien (Judgment lien Preparation and filing of one (1) Reaffirmation Agreement Stopping Creditors Actions against Debtor(s))	
	Debtors understands and agrees that contract attorney(s) may be use case. This representation is at no additional cost to the debtor.	ed to represent	them in their bankruptcy

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Post-Confirmation Modification of Plan or schedules Payment \$450.00

Post-Confirmation Motion for Relief \$450.00

Motion to Sell/Refinance Property of the Estate \$400.00

Application to Employ Professional \$400.00

Motion for Approval of Compromise and/or Settlement Proceeds \$450.00

Application for Outside Loan \$300.00

Motion to Modify Loan, Refinance, or Incur Debt \$400.00

Reset 341 Meeting of Creditors \$100.00

Trustee Motion to Dismiss \$350.00

Post Confirmation stay violations \$300.00

Motion to Server/Dismiss as to one joint debtor \$400.00

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In re	Latrice M. Wilson		Case No.	
		D 1 ()		

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

Motion to Reopen or Vacate Dismissal or Reconsider Dismissal \$500.00 Motion to Re-impose Stay \$500.00 Motion to Retain Tax Refund \$450.00 Motion to Retain Excess Insurance Proceeds \$450.00 Trip to courthouse to obtain a copy of a judgment \$300.00 Motion to Determine Claim Status and Release Lien \$500.00 Adversary Proceedings \$250.00/hr

Misc. Actions \$400.00

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 23, 2021 /s/ ChaRon A. Ballard ChaRon A. Ballard 251011 Date Signature of Attorney The Ballard Law Group, P.C 3664 Club Drive Suite 203 A Lawrenceville, GA 30044 404-220-9906 Fax: 404-220-9907 theballardlawgroup@gmail.com Name of law firm

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United States Bankruptcy Court Northern District of Georgia

		Not the III District of Georgia			
In re	Latrice M. Wilson		Case No.		
		Debtor(s)	Chapter	7	
VERIFICATION OF CREDITOR MATRIX					
The ab	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and c	orrect to the best	of his/her knowledge.	
Date:	September 23, 2021	/s/ Latrice M. Wilson Latrice M. Wilson			

Signature of Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this info	rmation to identify your case:		Ch	neck one box	only as d	lirected in this form and	in Form
Debtor 1	Latrice M. Wilson		12	22A-1Supp:			
Debtor 2 (Spouse, if filing)	-			■ 1. There	is no pres	umption of abuse	
United States	Bankruptcy Court for the: Northern District of	of Georgia		applie	s will be r	to determine if a presur made under <i>Chapter 7</i> in	•
Case number				☐ 3. The M	eans Test	icial Form 122A-2). does not apply now be	
						y service but it could ap	ply later.
Official F	Form 122A - 1			L Check i	1 11115 15 a	n amended filing	
	7 Statement of Your Cui	rent Mo	nthly Inc	ome			04/20
attach a separa case number (if qualifying milita	and accurate as possible. If two married people are sheet to this form. Include the line number to we known). If you believe that you are exempted frow ary service, complete and file Statement of Exemple alculate Your Current Monthly Income	vhich the additio m a presumptior	nal information of abuse becar	applies. On thuse you do no	ne top of a ot have pri	ny additional pages, writ marily consumer debts o	te your name and or because of
1. What is	your marital and filing status? Check one or	าlv.					
	narried. Fill out Column A, lines 2-11.	,					
	ed and your spouse is filing with you. Fill o	ut both Columns	s A and B, lines	s 2-11.			
<u></u>	ed and your spouse is NOT filing with you.						
	ing in the same household and are not lega	•	•	olumns A and	d B, lines 2	2-11.	
ре	ing separately or are legally separated. Fill nalty of perjury that you and your spouse are Ing apart for reasons that do not include evading	egally separate	d under nonba	nkruptcy law	that appli	es or that you and your	
101(10A). Fo the 6 months	erage monthly income that you received from all or example, if you are filing on September 15, the 6-m, add the income for all 6 months and divide the total the same rental property, put the income from that p	onth period would by 6. Fill in the re	d be March 1 thro esult. Do not inclu	ough August 31 ide any income	I. If the amo	ount of your monthly incompore than once. For examp	ne varied during le, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
 Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions). 				\$	0.00	\$	
	 Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 				0.00	\$	
of you o from an o and roon	unts from any source which are regularly par r your dependents, including child support unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	. Include regula d, your depende	r contributions ents, parents,	\$	0.00	\$	
5. Net inco	me from operating a business, profession,						
_			btor 1				
	ceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>	-				
	and necessary operating expenses thly income from a business, profession, or far	· —	Copy here ->	> \$	0.00	\$	
	me from rental and other real property	Ψ	. ',			·	
	and the same of th	Del	btor 1				
Gross re	ceipts (before all deductions)	\$ 0.00	-				
Ordinary	and necessary operating expenses	-\$ 0.00	_				
Net mon	thly income from rental or other real property	\$0.00	Copy here ->		0.00	\$	
7 Interest	dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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Debtor 1 Latrice M. Wilson Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. Food Stamp and child tax credit 1,400.00 **Child Support Income** 1,031.00 Total amounts from separate pages, if any. 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 2,431.00 2,431.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 2.431.00 Multiply by 12 (the number of months in a year) **x** 12 29,172.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. GA Fill in the number of people in your household. Fill in the median family income for your state and size of household. 92,286.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. 14a. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Latrice M. Wilson

Latrice M. Wilson Official Form 122A-1

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Debtor 1	Latrice M. Wilson	Case number (if known)	
	Signature of Debtor 1		
Da	te <u>September 23, 2021</u> MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.	

AcceptanceNOW Attn: Bankruptcy 5501 Headquarters Drive Plano, TX 75024

AcceptanceNOW 5501 Headquarters Drive Plano, TX 75024

America Coradius International 2420 Sweet Home Rd. Ste 150 Buffalo, NY 14228-2244

Autovest LLC c/o Roosen Varchetti & Olivier P O Box 1186 Smyrna, GA 30081

Bridgecrest 7300 East Hampton Avenue Suite 100 Mesa, AZ 85209

Bridgecrest Po Box 29018 Phoenix, AZ 85038

Caine & Weiner Attn: Bankruptcy 5805 Sepulveda Blvd Sherman Oaks, CA 91411

Caine & Weiner
Po Box 55848
Sherman Oaks, CA 91413

Cardiovascular Group, PC P.O.Box 530211 Atlanta, GA 30353

CHOC Childrens Specialists 1202 La Veta Ave. Orange, CA 92858

Citibank Citibank SD MC 425 5800 South Corp Place Sioux Falls, SD 57108

Citibank 5800 South Corporate Place Sioux Falls, SD 57108

Convergent Outsourciing Inc 800 SW 39th St PO Box 9004 Renton, WA 98057

Diversified Adjustment Service 600 Coon Rapids Blvd.
Minneapolis, MN 55433

First Investors Financial Services 380 Interstate North Parkway 3rd Floor Atlanta, GA 30399

First Investors Financial Services 3065 Akers Mill Road Atlanta, GA 30339

Georgia Department of Revenue Bankruptcy Section 1800 Century Blvd, Suite 17200 Atlanta, GA 30345 Gwinnett Magistrate Court 75 Langley Drive Lawrenceville, GA 30045

Internal Revenue Service 401 W. Peachtree St. NW Stop:334-D Atlanta, GA 30308

Lynch EMS 2950 E La Jolla Street Anaheim, CA 92806-1307

Mandarich Law Group LLP P O Box 109032 Chicago, IL 60610

Maroon Bells Emerg. Phys. LLC P O Box 13691 Philadelphia, PA 19101-3691

Mediation Recovery Center P.O. Box 646 DeKalb, IL 60115

Mediation Recovery Center P.O. Box 546 DeKalb, IL 60115

Navient Attn: Bankruptcy Po Box 9640 Wilkes-Barre, PA 18773

Navient Po Box 9500 Wilkes Barre, PA 18773 Navy FCU Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119

Navy FCU 820 Follin Lane Se Vienna, VA 22180

Navy FCU 820 Follin Lane Vienna, VA 22180

Navy Federal Credit Union Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119

Navy Federal Credit Union 1 Security Place Merrifield, VA 22116

Nelnet Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501

Nelnet Po Box 82561 Lincoln, NE 68501

OneMain P O Box 3251 Evansville, IN 47731-3251

OneMain Financial Attn: Bankruptcy Po Box 3251 Evansville, IN 47731 OneMain Financial Po Box 1010 Evansville, IN 47706

Peach State Federal Credit Union Attn: Bankruptcy 1505 Lakes Parkway, Ste 100 Lawrenceville, GA 30043

Peach State Federal Credit Union 1505 Lakes Parkway Lawrenceville, GA 30043

Portfolio Recovery Associates, LLC Attn: Bankruptcy 120 Corporate Boulevard Norfolk, VA 23502

Portfolio Recovery Associates, LLC 120 Corporate Blvd Ste 100 Norfolk, VA 23502

Professional Account Mgmt. LLC State Road and Tollway P O Box 671 Milwaukee, WI 53201-0671

Providence Southern California P O Box 31001-3000 Pasadena, CA 91110-3000

Sibley Heart Center Cardiology P O Box 116617 Atlanta, GA 30368-6617

Source Receivables Mgmt 4615 Dundas Drive Suite 102 Greensboro, NC 27407

South Gwinnett Radiology P.O.Box 116075 Atlanta, GA 30368-6075

Suntrust Bank/glelsi 2401 International Lane Madison, WI 53704

USDOE/GLELSI Attn: Bankruptcy Po Box 7860 Madison, WI 53707

USDOE/GLELSI 2401 International Lane Madison, WI 53704

Velocity Investments LLC c/o Mandarich Law Group LLP 125 Pownpark Dr Ste 350 Kennesaw, GA 30144

World Finance Attn: Bankruptcy Po Box 6429 Greenville, SC 29606

World Finance Po Box 6429 Greenville, SC 29607